

PTO/SB/21 (02-04)

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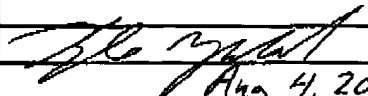
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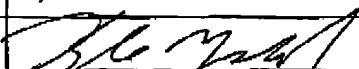
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/790,455	
	Filing Date	March 1, 2004	
	First Named Inventor	Alex J. Harvey	
	Art Unit	1642	
	Examiner Name	To be assigned	
Total Number of Pages in This Submission	2	Attorney Docket Number	AVI-025

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
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<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Kyle Yesland
Signature	
Date	Aug 4, 2004

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
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Date	Aug 4, 2004

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PTO/SB/82 (08-03)

Approved for use through 11/30/2005. OMB 0651-0035

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/790,455
	Filing Date	March 1, 2004
	First Named Inventor	Alex J. Harvey
	Art Unit	1642
	Examiner Name	To be assigned
	Attorney Docket Number	AVI-025

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

26739

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

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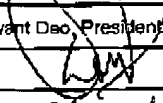
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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Dr. Yashwant Dao, President, AviGenics, Inc.		
Signature			
Date	08/04/2004	Telephone	706-227-1170

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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